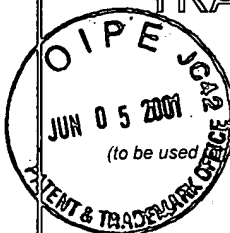


1647  
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# TRANSMITTAL FORM

Attorney Docket No.	6086.US.P1
Application Number	09/065,672
Filing Date	APRIL 23, 1998
First Named Inventor	P.A. BILLING-MEDEL, et al.
Group Art Unit	1647
Examiner	S. TURNER

TECH CENTER 1600/2800

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Amendment and Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Petition and Fee for Three Month Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 01-0025 (Abbott Laboratories). A duplicate copy of this sheet is enclosed.		

## CALCULATION OF FEE

					Small Entity			Large Entity	
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total	32	Minus	21	11	x \$9=	0		11x \$18=	198
Indep.	28	Minus	15	13	x \$40=	0		13x \$80=	1040
First Presentation of Multiple Dep. Claim					+\$135=	---		+ \$270=	
					total add'l fee	\$ 0		total add'l fee	\$ 1,238

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	RUTH PE PALILEO Registration No. 44,277 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature	<i>Ruth Pe Palileo</i>	Date	JUNE 1, 2001

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: JUNE 1, 2001

Signature	<i>Ruth Pe Palileo</i> RUTH PE PALILEO, (44,277)	Date:	JUNE 1, 2001
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